

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004410

Entity Name: 1ST SOURCE BANK

Current Principal Place of Business:

1800 SECOND STREET, SUITE 712
SARASOTA, FL 34236

FILED
Apr 24, 2017
Secretary of State
CC8136527509

Current Mailing Address:

P.O. BOX 1602
SOUTH BEND, IN 46634 US

FEI Number: 35-0309575

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title C
Name MURPHY, CHRISTOPHER J III
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title VC
Name JONES, WELLINGTON D III
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title DP
Name SEITZ, JAMES R
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title D
Name OZARK, TIMOTHY K
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title VP
Name PESARESI, LISA A
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title S
Name GRIFFITH, JOHN B
Address 100 N. MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

Title T
Name SHORT, ANDREA
Address 100 MICHIGAN STREET
City-State-Zip: SOUTH BEND IN 46601

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREA G. SHORT

TREASURER

04/24/2017

Electronic Signature of Signing Officer/Director Detail

Date